

## DR-2 Disclosure Summary Page

DR-2

|                                    |               |                           |                       |                |
|------------------------------------|---------------|---------------------------|-----------------------|----------------|
| <b>Iowa Optometric Association</b> |               | <b>Status:</b>            |                       | <b>Audited</b> |
| <b>Committee Type:</b>             | Iowa PAC      | <b>Statutory Due Date</b> | 1/19/2015             |                |
| <b>County:</b>                     | _NA           | <b>Adjusted Due Date</b>  | 1/20/2015             |                |
| <b>District:</b>                   | 0             | <b>Filed Date</b>         | 1/13/2015 9:42:23 AM  |                |
| <b>Committee Code:</b>             | 6118          | <b>Postmark Date</b>      |                       |                |
| <b>Political Party:</b>            | Not Available | <b>Amendment Date</b>     | 8/17/2016 10:15:34 AM |                |
| <b>Report Date:</b>                | 2014          | <b>Candidate Name:</b>    |                       |                |

## Treasurer

|                   |                         |                    |      |                  |              |
|-------------------|-------------------------|--------------------|------|------------------|--------------|
| <b>Last Name:</b> | Ellis                   | <b>First Name:</b> | Gary | <b>MI:</b>       | D            |
| <b>Address:</b>   | 6150 Village View Drive | Suite 105          |      |                  |              |
| <b>City:</b>      | West Des Moines         | <b>State:</b>      | IA   | <b>Zip Code:</b> | 50266        |
|                   |                         |                    |      | <b>Phone:</b>    | 515-222-5679 |
| <b>E-Mail:</b>    | garye@iowaoptometry.org |                    |      |                  |              |

## Chairperson

|                   |                         |                    |      |                  |              |
|-------------------|-------------------------|--------------------|------|------------------|--------------|
| <b>Last Name:</b> | Anderson, O.D.          | <b>First Name:</b> | Jeff | <b>MI:</b>       | C            |
| <b>Address:</b>   | 621 Story Street        |                    |      |                  |              |
| <b>City:</b>      | Boone                   | <b>State:</b>      | IA   | <b>Zip Code:</b> | 50036        |
|                   |                         |                    |      | <b>Phone:</b>    | 515-432-7918 |
| <b>E-Mail:</b>    | garye@iowaoptometry.org |                    |      |                  |              |

## Statement of Cash On Hand

|   |                    |
|---|--------------------|
| <b>Cash on Hand at Start of Period</b>      | <b>\$39,563.29</b> |
| <b>Schedule A: Cash Contributions Total</b> | \$5,113.23         |
| <b>Schedule F1: Loans Received Total</b>    | \$0.00             |
| <b>Schedule H2: Campaign Property Sales</b> | \$0.00             |
| <b>Sub-Total</b>                            | <b>\$44,676.52</b> |
| <b>Schedule B: Expenditure Total</b>        | \$1,672.96         |
| <b>Schedule F2: Cash Loan Repayments</b>    | \$0.00             |
| <b>Cash on Hand at End of Period</b>        | <b>\$43,003.56</b> |

## Additional Assets and Liabilities

|   |        |
|---|--------|
| <b>Loans in Place at Start of Period</b>    | \$0.00 |
| <b>Schedule D: Unpaid Bills</b>             | \$0.00 |
| <b>Schedule E: In-Kind Contributions</b>    | \$0.00 |
| <b>Schedule F2: Forgiven Loans</b>          | \$0.00 |
| <b>Schedule F2: Outstanding Loans</b>       | \$0.00 |
| <b>Schedule G: Consultant Breakdown</b>     | No     |
| <b>Schedule H1: Campaign Property Value</b> | \$0.00 |